

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street) ▼

2800 Shirlington Road, Suite 930

☐ Check if different than previously reported. (ACC)

Arlington

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00325076

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dorie Velezis

Signature of Treasurer

Dorie Velezis

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
01 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		1278844.43
(b) Cash on Hand at Beginning of Reporting Period.....	1278844.43	
(c) Total Receipts (from Line 19)	19213.46	19213.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1298057.89	1298057.89
7. Total Disbursements (from Line 31)	35317.14	35317.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1262740.75	1262740.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9214.18	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y
 01 / 31 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3050.00

3050.00

(ii) Unitemized

6387.87

6387.87

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

9437.87

9437.87

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

9437.87

9437.87

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

25.59

25.59

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

9750.00

9750.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

9750.00

9750.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

19213.46

19213.46

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

9463.46

9463.46

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	9750.00	9750.00
(ii) Non-Federal Share.....	9750.00	9750.00
(b) Other Federal Operating Expenditures	11192.14	11192.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	30692.14	30692.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	3500.00
24. Independent Expenditures (use Schedule E)	1125.00	1125.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35317.14	35317.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25567.14	25567.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9437.87	9437.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9437.87	9437.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	20942.14	20942.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	20942.14	20942.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. JEAN PARRISH

Mailing Address 12027 SYCAMORE LAKES CT

City State Zip Code
 FORT WAYNE IN 46814

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 18 / 2012

Transaction ID : SA11AI.55145

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR MIKE D RISINGER

Mailing Address 421 E GREENWOOD ST

City State Zip Code
 MORTON IL 61550

FEC ID number of contributing
federal political committee.

C

Name of Employer

ILLINOIS

Occupation

JUDGE

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 08 / 2012

Transaction ID : SA11AI.55183

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR JEFFERY ROBILLARD

Mailing Address 5028 LONGVIEW CT

City State Zip Code
 WEDDINGTON NC 28104

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACUMED

Occupation

SALES MANAGER

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 26 / 2012

Transaction ID : SA11AI.55115

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11AI.55145
0108321-0000062

Form/Schedule: SA11AI
Transaction ID: SA11AI.55183
0103251-0000100

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.55115

0109414-0000031

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. MRS ALICE WHEATLEY

Mailing Address 119 CORNERTONE CIRCLE

City
FRANKLIN

State Zip Code
TN 37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED- NOT RECD

Occupation
INFO REQUESTED- NOT RECD

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 10 / 2012

Transaction ID : SA11AI.55134

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MRS JEANETTE F YANDOW

Mailing Address 1133 LONG POND RD

City
ROCHESTER

State Zip Code
NY 14626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 11 / 2012

Transaction ID : SA11AI.55092

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

3050.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.55134

0109410-0000051

Form/Schedule: SA11AI

Transaction ID: SA11AI.55092

0103971-0000008

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

CAMPAIGN FOR WORKING FAMILIES

3385.20

2858.55

1066.00

7309.75

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has 10 vertical supports. The bottom beam has 10 vertical supports. The vertical supports are represented by short vertical lines. The horizontal beams are represented by thick horizontal lines.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. HELLER INFORMATION SERVICES

Mailing Address 12450 Parklawn Drive

City	State	Zip Code
Rockville	MD	20852

Purpose of Disbursement
COMPUTER SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		13		2012

Transaction ID : SB21B.55287

Amount of Each Disbursement this Period

211.50

Full Name (Last, First, Middle Initial)

B. IRON MOUNTAIN

Mailing Address 745 ATLANTIC AVE

City	State	Zip Code
BOSTON	MA	02111

Purpose of Disbursement
OFFICE EXPENSE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		13		2012

Transaction ID : SB21B.55288

Amount of Each Disbursement this Period

285.32

Full Name (Last, First, Middle Initial)

C. LEXIS NEXIS

Mailing Address P.O. BOX 7247-7090

City	State	Zip Code
PHILADELPHIA	PA	19170

Purpose of Disbursement
DUES & SUBSCRIPTIONS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		13		2012

Transaction ID : SB21B.55289

Amount of Each Disbursement this Period

350.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

846.82

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. LPS

Mailing Address P.O. BOX 2325

City
FAIRFAXState
VAZip Code
22031Purpose of Disbursement
PAC - DATA PROCESSING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2012

Transaction ID : SB21B.55313

Amount of Each Disbursement this Period

95.68

Full Name (Last, First, Middle Initial)

B. U.S. POSTMASTER

Mailing Address MAIN POST OFFICE

City
WASHINGTONState
DCZip Code
20000Purpose of Disbursement
BOX RENEWAL FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2012

Transaction ID : SB21B.55273

Amount of Each Disbursement this Period

545.00

Full Name (Last, First, Middle Initial)

C. U.S. POSTMASTER

Mailing Address MAIN POST OFFICE

City
WASHINGTONState
DCZip Code
20000Purpose of Disbursement
BOX RENEWAL FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2012

Transaction ID : SB21B.55274

Amount of Each Disbursement this Period

605.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1245.68

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

CAMPAIGN FOR WORKING FAMILIES

A. U.S. POSTMASTER

The image shows three 3x3 grids illustrating the dot grid system for the numbers 01, 23, and 2012. Each grid has a top row of four dots (M, M, D, D) and a bottom row of four dots (Y, Y, Y, Y). The number 01 is formed by the first two columns, 23 by the last two columns, and 2012 by all four columns.

Category/
Type

190.00

State: District:

B. VERIZON

MM / DD / YYYY

Category/
Type

456.95

State: District:

C. DEAN VIRAG

The image shows three 3x3 grids representing the numbers 01, 13, and 2012. Each grid has a top row of letters (M, D, Y), a middle row of numbers (0, 1, 2), and a bottom row of letters (M, D, Y). The number 01 is represented by a dot in the top-left cell (M) and the middle-left cell (0). The number 13 is represented by a dot in the top-right cell (D) and the middle-right cell (1). The number 2012 is represented by a dot in the top-right cell (D) and the middle-right cell (1).

Category/
Type

500.00

State: District:

1146.95

10549.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

A. HOOSIERS FOR RICHARD MOURDOCK INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		20		2012

Mailing Address PO BOX 1583

City	State	Zip Code
INDIANAPOLIS	IN	46206

Purpose of Disbursement
CONTRIBUTION

Candidate Name

HOOSIERS FOR RICHARD MOURDOCK INC

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 00

Category/
Type**Transaction ID : SB23.55294**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RICK SANTORUM FOR PRESIDENT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2012

Mailing Address P.O. BOX 37

City	State	Zip Code
VERONA	PA	15147

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RICK SANTORUM FOR PRESIDENT

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Category/
Type**Transaction ID : SB23.55302**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

3500.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 22

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

COVINGTON & BURLINGNature of Debt (Purpose):
PAC LEGAL FEES

Mailing Address 1201 PENNSYLVANIA AVE NW

City State

WASHINGTON

Zip Code

DC

20044

Outstanding Balance Beginning This Period

1066.00

Transaction ID : SD10.55084

Amount Incurred This Period

0.00

Payment This Period

1066.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DESIGN 4 INC.

Nature of Debt (Purpose):

PAC GRAPHIC DESIGN & PRODUCTION

Mailing Address 106 N. Collins Street

City State

Plant City

Zip Code

FL

33563

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.55311

Amount Incurred This Period

3461.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3461.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DIRECTECH

Nature of Debt (Purpose):

CAGING AND DATA PROCESSING

Mailing Address 8595 GROVEMONT CIRCLE

City

GAITHERSBURG

State

MD

Zip Code

20877

Outstanding Balance Beginning This Period

223.11

Transaction ID : SD10.4694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

1) **SUBTOTALS** This Period This Page (optional)..... ►

3684.11

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 22

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

J&J PRINTINGNature of Debt (Purpose):
PRINTING EXPENSE

Mailing Address 5540 PORT ROYAL ROAD

City State

SPRINGFIELD

Zip Code

VA 22151

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.55308

Amount Incurred This Period

865.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

865.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LPSNature of Debt (Purpose):
PAC DATA PROCESSING SERVICES

Mailing Address P.O. BOX 2325

City State

FAIRFAX

Zip Code

VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.55304

Amount Incurred This Period

157.29

Payment This Period

157.29

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LPSNature of Debt (Purpose):
PAC DATA PROCESSING SERVICES

Mailing Address P.O. BOX 2325

City
FAIRFAXState
VAZip Code
22031

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.55305

Amount Incurred This Period

95.68

Payment This Period

95.68

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

865.20

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 22

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LPS

Nature of Debt (Purpose):

PAC DATA PROCESSING SERVICES

Mailing Address P.O. BOX 2325

City State

FAIRFAX

Zip Code

VA

22031

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.55306

Amount Incurred This Period

575.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.43

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MWM DIRECT MARKETING SERVICES

Nature of Debt (Purpose):

PAC - DIRECT MAIL

Mailing Address 8048 HILLRISE COURT

City State

ELKRIDGE

Zip Code

MD

21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID : SD10.4696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

WASHINGTON INTELLIGENCE BUREAU

Nature of Debt (Purpose):

**PAC - CAGING AND DATA ENTRY
SERVICES**

Mailing Address 4128 PEPSI PLACE

City State Zip Code

CHANTILLY

VA

20151

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.55307

Amount Incurred This Period

1768.54

Payment This Period

0.00

Outstanding Balance at Close of This Period

1768.54

1) **SUBTOTALS** This Period This Page (optional)..... ►

4664.87

2) **TOTALS** This Period (last page this line number only)..... ►

9214.18

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

9214.18

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00325076 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee In Altum Productions		Date MM / DD / YYYY 01 / 25 / 2012
Mailing Address 7621 Provincial Dr.		Amount 1125.00
City McLean	State VA	
Zip Code 22102	Transaction ID : SE.54414	
Purpose of Expenditure Web Video	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1125.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code		
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1125.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	1125.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dorie Velez

[Electronically Filed]

Date

MM / DD / YYYY
02 / 17 / 2012

Signature

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIES

Transaction ID : H1.55318

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒ **or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 21 OF 22

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
CAMPAIGN FOR WORKING FAMILIESNAME OF ACCOUNT
CAMPAIGN FOR WORKING FAMILIES

DATE OF RECEIPT

MM / DD / YYYY
01 / 27 / 2012

TOTAL AMOUNT TRANSFERRED

9750.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

9750.00

Transaction ID : H3.55317

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

9750.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

9750.00

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 OF 22

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A. Full Name (Last, First, Middle Initial) GARY BAUER		Transaction ID : H4.55276		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 SHIRLINGTON ROAD #930					
City ARLINGTON	State VA	Zip Code 22206			
Purpose of Disbursement: PAC CONSULTING POLITICAL AND ADMIN				Allocated Activity or Event Year-To-Date 13500.00	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 01 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6750.00			6750.00		13500.00

B. Full Name (Last, First, Middle Initial) BILL MOELLER		Transaction ID : H4.55278		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 SHIRLINGTON ROAD #930					
City ARLINGTON	State VA	Zip Code 22206			
Purpose of Disbursement: PAC CONSULTING RESEARCHER/WRITER				Allocated Activity or Event Year-To-Date 16500.00	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 01 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1500.00			1500.00		3000.00

C. Full Name (Last, First, Middle Initial) Dorie Velezis		Transaction ID : H4.55280		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 S. Shirlington Road, #930					
City Arlington	State VA	Zip Code 22206			
Purpose of Disbursement: PAC CONSULTING ACCOUNTING				Allocated Activity or Event Year-To-Date 19500.00	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 01 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1500.00			1500.00		3000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9750.00		9750.00		19500.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
9750.00		9750.00		19500.00